| TOTAL CHARGEABLE CLAIMS  |                       | 12   |            |                 |           |      |          |                  |                         |                    |                        |                              |                      |          |
|--|-----------------------|--|------------|-----------------|-----------|------|----------|------------------|-------------------------|--------------------|------------------------|------------------------------|----------------------|----------|
| TOTAL CLAIMS    Column 1   Column 2  |                       | ber<br>-   | cket Numb  | or Do           | plication | Ap   | D        | ON RECOF         |                         |                    |                        |                              |                      | ge*      |
| TOTAL CLAIMS    Column 1   Column 2   Column 3   Claims   Amendment   Amendmen |                       |  |            | OR              |           |      |          | nn 2)            |                         |                    |                        | CLAIMS AS                    |                      |          |
| TOTAL CHARGEABLE CLAIMS    Minus 20  |                       | FEE  |            |                 |           | E    | RAT      |                  |                         |                    | 12                     |                              | TAL CLAIMS           | TO       |
| NDEPENDENT CLAIMS  7 minus 3 =   NULTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II  CLAIMS HIGHEST NUMBER PREVIOUSLY PAID FOR AMENDMENT PREVIOUSLY PAID FOR PRESENT Independent   NIMBER PRESENTATION OF MULTIPLE DEPENDENT CLAIM  CCOlumn 2)  (Column 3)  (Column 3)  (Column 4)  (Column 5)  (Column 6)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 9)  (Column 9)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  REMAINING PRESENT PRESENT PRESENT PREVIOUSLY PAID FOR ADDIT. FEE  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 4)  (Column 6)  (Column 7)  (Column 8)  (Column 8)  (Column 8)  (Column 9)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 6)  (Column 7)  (Column 7)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 4)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  | ).00                  | 740.0  | ASIC FEE   | OR              | 370.00    | FEE  | BASIC    | R EXTRA          | NUMBE                   | FILED              | NUMBER                 |                              | }                    | -OF      |
| If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II  CLAIMS REMAINING REMAINING AFTER AMENDENT PREVIOUSLY PRIOR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  |                       |  | X\$18=     | OR              | X\$ 9=    |      | • 🔞      |                  | /2 minus 20=            |                    | OTAL CHARGEABLE CLAIMS |                              |                      |          |
| # 140 OR +280 OR +280 OR TOTAL |                       |  | X84=       |                 | X42=      |      | • 0      |                  | 2 minus 3 =             |                    | NDEPENDENT CLAIMS      |                              |                      |          |
| If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II  CLAIMS AS AMENDED - PART II  CLAIMS REMAINING REMAINING AFTER PREVIOUSLY PAID FOR INDIRECT PRESENT FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  (Column 1)  (Column 2)  (Column 3)  CLAIMS REMAINING AFTER PREVIOUSLY PAID FOR INDIRECT PRESENT EXTRA PAID FOR INDIRECT PREVIOUSLY PAID FOR INDIRECT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total   Total   Minus   ***   |                       |  | .000       |                 |           |      |          |                  |                         |                    | RESENT                 | DENT CLAIM PR                | TIPLE DEPEN          | (UI      |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING REMAINING REMAINING REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR  Total * Minus ** =   (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING REMAINING REMAINING REMAINING REMAINING REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR  Total * Minus ** =   Independent * Minus ** =   Indepen |                       | 3  |            | L               |           |      |          | olumn 2          | r "O" in c              | ero ente           | ess than z             | in column 1 is l             | he difference i      | lf 1     |
| Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT  Total  COLUMN 1) (COLUMN 2) (COLUMN 3)  CLAIMS REMAINING AFTER AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  COLUMN 2) (COLUMN 3)  CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR  COLUMN 3)  CLAIMS REMAINING AFTER AMENDMENT  CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR  CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PRESENT PREVIOUSLY PRESENT PREVIOUSLY PRESENT  |                       | <i>     </i>                                     |            | OR              |           | AL   | 101      | 0.0              |                         |                    |                        |                              |                      |          |
| CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR LINE PRESENT PREVIOUSLY PAID FOR LINE PRESENTATION OF MULTIPLE DEPENDENT CLAIM COR ADDIT. FEE LINE PREVIOUSLY PAID FOR LINE PRESENT LINE PREVIOUSLY PAID FOR LINE PRESENT LINE PREVIOUSLY PAID FOR LINE PREVIOUSLY PAID FO |                       |  | •          | OR              | ENTITY.   | LL E | SMA      | (Column 3)       |                         |                    | MENDEL                 |                              |                      | · _      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                       | ADE<br>TION<br>FE                                | RATE       |                 | TIONAL    | ΓE   | RAT      |                  | ABER<br>OUSLY           | NUN<br>PREVI       |                        | CLAIMS<br>REMAINING<br>AFTER |                      |          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   | /                     |  | X\$18=     | OR              |           | 9=   | X\$      | =                |                         | _                  | Minus                  | + 14                         | Total                |          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   | _                     | 7  | X84=       |                 |           | 2=   | X42      | =                | 3                       | ***                | Minus                  | • >                          | Independent          |          |
| (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT  Total  * Minus  ***  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  (Column 1) (Column 2) (Column 3)  ***  ***  ***  ***  ***  ***  ***   | _                     |  | +280=      |                 |           |      | 114      |                  | IT CLAIM                | PENDEN             | JLTIPLE DE             | NTATION OF MI                | FIRST PRESE          |          |
| (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT  Total  Minus  **  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  (Column 1) (Column 2) (Column 3)  CLAIMS  HIGHEST  NUMBER PRESENT EXTRA PRESEN | _                     | <del>                                     </del> | TOTAL      |                 |           |      |          |                  |                         |                    |                        |                              |                      |          |
| CLAIMS REMAINING AFTER AMENDMENT  Total  Independent   Minus  Min |                       |  | ADDIT. FEE | Jon.            |           | FEE  | , ADDIT. | (Column 3)       | .mn 31                  | (Calı              |                        | (Column 1)                   |                      | •        |
| Independent * Minus *** = X42= OR X84= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  | DDI-<br>ONAL<br>FEE   | TIOI   | RATE       |                 | TIONAL    | TE   | RA       | PRESENT          | MEST<br>MBER<br>MOUSLY  | HIG<br>NUI<br>PREV |                        | CLAIMS<br>REMAINING<br>AFTER |                      |          |
| +140= OR +280=  TOTAL ADDIT. FEE  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST   |                       |  | X\$18=     | OR.             |           | 9=   | . X\$    | =                |                         | **                 | Minus                  | •                            |                      |          |
| +140= OR +280=  TOTAL ADDIT. FEE  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST   |                       |  | X84=       | OB              |           | 2=   | X4       |                  |                         | 1                  | 1                      |                              |                      | ME       |
| (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST   |                       |  | +280=      | 1               |           | n-   | +14      |                  | IT CLAIM                | PENDEN             | ULTIPLE DE             | NTATION OF M                 | FIRST PRESE          |          |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  |                       | -  | TOTAL      | امرا            |           | OTAL | <u> </u> |                  |                         |                    |                        |                              |                      |          |
| CLAIMS HIGHEST   |                       | Ē <b>L</b>                                       | ADDIT. FEE | Jon             |           | FEE  | ADDIT    | (Caluma 0)       | 51                      | (0.4               |                        | <b>10.1 15</b>               |                      |          |
| Total  | ADDI-<br>IONAL<br>FEE | ПО   | RATE       | 1               | TIONAL    | TE   | RA       | PRESENT          | HEST<br>MBER<br>/IOUSLY | HIG<br>NU<br>PREV  |                        | CLAIMS<br>REMAINING<br>AFTER |                      | N C      |
| Z  |                       |  | X\$18=     |                 |           | 9=   | XS       | =                |                         |                    | Minus                  |                              | Total                |          |
| Independent * Minus *** = X42= OR X84=   |                       | 十  | <u> </u>   | 1               |           |      |          | •                |                         | ***                | Minus                  | *                            | Independent          | MEN      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                       | +-   | -          | 1 <sup>OH</sup> | · ·       |      |          | A 🔲              | NT CLAIM                | PENDE              | ULTIPLE DE             | NTATION OF M                 | FIRST PRESE          | <b>آ</b> |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |                       | _  |            | OR              |           |      | 1        | oluma 3          | rile "N" in ~           | lumn 2 um          | ho patry in co         | me t is less than t          | lf the eater is a-t- | •        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   |                       |  |            | OR              |           |      |          | an 20, enter *20 | E is less tha           | HIS SPAÇI          | aid For IN TI          | mber Previously P            | If the "Highest Nu   | -        |